## 10/720,23/ PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

10720231

Effective October 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			75					RATE	FEE	]	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			=02 minus 2 <i>6</i>		*19			X\$ 9=	_	OR	X\$18=	SUE	
INDEPENDENT CLAIMS			minus 3 =		• -			X43=		OR	X86=		
ML.	ILTIPLE DEP <b>E</b> I	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	column 2	į	TOTAL		OR	TOTAL	111 2	
	C	LAIMS AS A	MENDED - PART II (Column 2) (Column			(Column 3)	1	SMALL	ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A	4/25/65	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	EST BER OUSLY	PRESENT' EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 23	Minus	# 3	39	=	11	X\$ 9=		OR	X\$18=		
	Independent	· 2	Minus		3		$\  \ $	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	1	
								TOTAL ODIT, FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	Independent + Minus +++ FIRST PRESENTATION OF MULTIPLE DEPENDENT		CL AINA	. 🗆	full [	X43=		OR	X86=			
	FIRST PRESE	NIATION OF ME	ILTIPLE DEF	ENDENI	·		۱ <sub>-</sub>	+145=		OR	+290 <i>≐</i>		
						•	L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***				X43=		o'R	X86=		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	PENDENT	CLAIM		1	+145=			+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
**	f the "Highest Nu	mber Previously Pa mber Previously Paid ber Previously Paid	id For IN THI	S SPACE is	less that	n 3, enter "3."		DDIT. FEE L		•	ADDIT. FEE <b>l</b> umn 1.		
								_			•		